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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	STL9708
	First Named Inventor	Ng, WeiLoon
	COMPLETE IF KNOWN	
	Application Number	09/901,501
	Filing Date	July 9, 2001
	Group Art Unit	2185
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Partition Recovery Method

the specification of which (Title of the Invention)
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **July 9, 2001** as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 35(b) of any foreign application(s) for patent or inventor's certificate, or 35(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/218,024	07/12/2000

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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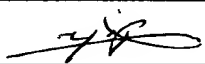
DECLARATION — Utility or Design Patent Application							
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
U.S. Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.							
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:							
<input type="checkbox"/> Customer Number 				<input type="checkbox"/> OR			
<input checked="" type="checkbox"/> Registered practitioner(s) name/registration number listed below				<input type="checkbox"/> Place Customer Number Bar Code Label here			
Name		Registration Number		Name		Registration Number	
Shawn B Dempster		34,321					
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.							
Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label 							
OR <input checked="" type="checkbox"/> Correspondence address below							
Name		Shawn B Dempster					
Address		Seagate Technology LLC					
Address		1280 Disc Drive - SHK2LG					
City		Shakopee		State		MN	
Country		USA		ZIP		55379-1863	
Telephone		1-952-402-2517		Fax		1-952-402-2657	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
WeiLoon				Ng			
Inventor's Signature						Date	
						19 Sept 01	
Residence: City		State		Country		Citizenship	
				Singapore		Singaporean	
Post Office Address							
Bldg 251 Kim Keat Link #05-117 14 Verde Crescent							
Post Office Address							
City		State		ZIP		Country	
				688364		Singapore	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto							

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

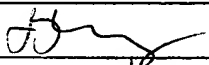

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YingEe		Yip	
Inventor's Signature 		Date	
Residence: City	State	Country Singapore	Citizenship Singaporean
Mailing Address <u>30 Woodlands Crescent #12-09 S (738086)</u> Blk 128 #20-24 Bukit Merah View			
Mailing Address			
City	State	ZIP	Country Singapore
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YongPeng		Chng	
Inventor's Signature		Date	
Residence: City	State	Country Singapore	Citizenship Singaporean
Mailing Address <u>Blk 84 #11-319 Lorong 2 Toa Payoh</u>			
Mailing Address			
City	State	ZIP	Country Singapore
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Liza MuiCheng		Chia	
Inventor's Signature		Date	
Residence: City	State	Country Singapore	Citizenship Singaporean
Mailing Address <u>34 Thomson Green</u>			
Mailing Address			
City	State	ZIP	Country Singapore

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YingEe		Yip	
Inventor's Signature		Date	
Residence: City	State	Country Singapore	Citizenship Singaporean
Mailing Address Blk 128 #20-24 Bukit Merah View			
Mailing Address			
City	State	ZIP	Country Singapore
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YongPeng		Chng	
Inventor's Signature 		Date 19 Sep 2001	
Residence: City	State	Country Singapore	Citizenship Singaporean
Mailing Address Blk 84 #11-319 Lorong 2 Toa Payoh			
Mailing Address			
City	State	ZIP	Country Singapore
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Liza MuiCheng		Chia	
Inventor's Signature 		Date 19 Sept 2001	
Residence: City	State	Country Singapore	Citizenship Singaporean
Mailing Address 34 Thomson Green			
Mailing Address			
City	State	ZIP 574910	Country Singapore

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